



Department of Medical Assistance Services  
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# MEDICAID PROVIDER MANUAL UPDATE

TO: All Durable Medical Equipment and Supplies Providers participating in the Virginia Medical Assistance Program, Managed Care Organizations (MCOs), and holders of the *Durable Medical Equipment and Supplies* Provider Manual

UPDATE: DME-02-05

FROM: Patrick W. Finnerty, Director  
Department of Medical Assistance Services (DMAS)

DATE: 12/30/2005

SUBJECT: Update to Second Edition of the *Durable Medical Equipment and Supplies* Provider Manual

The purpose of this memorandum is to provide you with updated information regarding Appendix B of the *Durable Medical Equipment (DME) and Supplies* Provider Manual. DMAS has made several updates to Appendix B based on notification from the Centers for Medicare and Medicaid Services (CMS) that several Healthcare Common Procedural Coding System (HCPCS) codes are being discontinued. The tables below detail the changes made. These updates are effective on the date noted under each section of this Medicaid Memo.

**Please Note:** Appendix B of the *DME and Supplies* Provider Manual has been updated and is now available on the DMAS website ([www.dmas.virginia.gov](http://www.dmas.virginia.gov)) to be downloaded, or you may contact Commonwealth-Martin to receive your copy of the updated Appendix B.

## **DELETIONS FROM APPENDIX B**

The following HCPCS codes have been removed from Appendix B, effective December 31, 2005. Please see the Comment column for further instructions if applicable:

Code	Short Description	Comment
A6551	Canister set for negative pressure wound therapy electrical pump	Replaced by A7000 with new rate of \$8.51
L8100	Gradient compression stocking	Replaced by A6530
L8110	Gradient compression stocking	Replaced by A6531
L8120	Gradient compression stocking	Replaced by A6532
L8130	Gradient compression stocking	Replaced by A6533
L8140	Gradient compression stocking	Replaced by A6534
L8150	Gradient compression stocking	Replaced by A6535
L8160	Gradient compression stocking	Replaced by A6536
L8170	Gradient compression stocking	Replaced by A6537
L8180	Gradient compression stocking	Replaced by A6538
L8190	Gradient compression stocking	Replaced by A6539
L8195	Gradient compression stocking	Replaced by A6540

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Code	Short Description	Comment
L8200	Gradient compression stocking	Replaced by A6541
L8210	Gradient compression stocking	Replaced by A6542
L8220	Gradient compression stocking	Replaced by A6543
L8230	Gradient compression stocking	Replaced by A6544
L8239	Gradient compression stocking	Replaced by A6549
A4254	Replacement battery for use with blood glucose monitor	Both rental and purchase code ended. Replaced by new national codes for blood glucose monitor batteries found under the Diabetes Products section of the Appendix B.
A5119	Ostomy Skin Barrier Wipes	Replaced by A5120
E1211	Motorized Wheelchair	Rental and purchase codes ended. Use K0014 for motorized wheelchairs until additional motorized wheelchair codes are added to the Appendix B.
E1212	Motorized Wheelchair	
E1213	Motorized Wheelchair	
E0953	Pneumatic tire, each	Use E1399 until additional tire codes are added to the Appendix B.
E0954	Semi-pneumatic caster, each	Use E1399 until additional caster codes are added to the Appendix B.
E0972	Wheelchair accessory, transfer board or device, each	Both rental and purchase code ended. Use E1399.
E0996	Tire, Solid, each	Use E1399 until additional tire codes are added to the Appendix B.
E1000	Tire, Pneumatic Caster	Use E1399 until additional tire/caster codes are added to the Appendix B.
E1001	Wheel, Single	Both rental and purchase code ended. Use E1399 until additional wheel codes are added to the Appendix B.
K0064	Zero pressure tube (flat free insert), any size	Both rental and purchase code ended. Use E1399.
K0068	Pneumatic tire tube, each	Both rental and purchase code ended. Use E1399 until additional tire codes are added to the Appendix B.
K0106	Arm trough	Both rental and purchase code ended. Use E1399 until additional arm trough codes are added to the Appendix B.

### **ADDITIONS TO APPENDIX B**

The following HCPCS codes have been added to Appendix B, effective January 1, 2006. Please see Appendix B for Billing Unit, PA Type, Price, and Limit information:

Code	Description	Appendix B Category
A4363	Ostomy clamp, any type, replacement only, each	Ostomy/Colostomy Products/Ostomy Accessories
A5120	(Ostomy) skin barrier wipes or swabs, each	Ostomy Skin Barrier Liquids, Pastes, Powder and Rings

### **CHANGES TO PRICE COLUMN IN APPENDIX B AND VAMMIS**

The following changes in price are due to updated DMERC rates, effective January 1, 2006. Effective dates of other price changes are noted below:

Code	Past Pricing in Appendix B	Present Pricing	Reason for change
E0971	\$55.89	\$43.39	DMERC rate
E0971 RR	\$.20	\$.14	DMERC rate
T4525	Usual and Customary	\$62.40	Entered fee

### **DME MODIFIERS**

Effective with dates of service on and after January 1, 2004, DMAS no longer recognizes modifiers used for DME codes with two exceptions: (i) the nationally established modifier for rental items, which is "RR" for the DME program; and (ii) the modifier of U1 for extra absorbent diapers. Please see the updated Appendix B for the appropriate codes and modifiers for diapers.

### **COMMUNICATION TO DME PROVIDERS**

DMAS has designed an email address specifically for providers to email questions about DME to DMAS ([dme@dmass.virginia.gov](mailto:dme@dmass.virginia.gov)). These questions should pertain to policies, codes, or rates and should not pertain to pre-authorizations, as these questions should continue to be directed to the pre-authorization contractor, WVMI, at **1-800-299-9864**. To subscribe, send an email to [dme@dmass.virginia.gov](mailto:dme@dmass.virginia.gov). On the subject line of the email form, type "subscribe" (without the quotes). This is an automated system. If you put anything else on the subject line, you will not be added to the list. Please include "recipient," "provider," or "other," whichever best describes you, in the body of your email. To unsubscribe, send an email to DMAS at [dme@dmass.virginia.gov](mailto:dme@dmass.virginia.gov). On the subject line of the email form, type "unsubscribe" (without the quotes).

### **ELIGIBILITY AND CLAIMS STATUS INFORMATION**

DMAS offers a web-based Internet option to access information regarding Medicaid and FAMIS eligibility, claims status, check status, service limits, prior authorization, and pharmacy prescriber identification information. The website address to use to enroll for access to this system is <http://virginia.fhsc.com>. The MediCall voice response system will provide the same information and can be accessed by calling 1-800-884-9730 or 1-800-772-9996. Both options are available at no cost to the provider.

### **COPIES OF MANUALS**

DMAS publishes electronic and printable copies of its Provider Manuals and Medicaid Memoranda on the DMAS website at [www.dmas.virginia.gov](http://www.dmas.virginia.gov) (*please note the new DMAS website address*). Refer to the Provider Column to find Medicaid and SLH Provider Manuals or click on "Medicaid Memos to Providers" to view Medicaid Memoranda. The Internet is the most efficient means to receive and review current provider information. If you do not have access to the Internet or would like a paper copy of a manual, you can order it by contacting Commonwealth-Martin at 1-804-780-0076. A fee will be charged for the printing and mailing of the manuals and manual updates requested.

### **"HELPLINE"**

The "HELPLINE" is available to answer questions Monday through Friday from 8:30 a.m. to 4:30 p.m., except on state holidays. The "HELPLINE" numbers are:

1-804-786-6273	Richmond area and out-of-state long distance
1-800-552-8627	All other areas (in-state, toll-free long distance)

Please remember that the "HELPLINE" is for provider use only. Please have your Medicaid provider identification number available when you call.

### **PROVIDER E-NEWSLETTER SIGN-UP**

DMAS is pleased to inform providers about the creation of a new Provider E-Newsletter. The intent of this electronic newsletter is to inform, communicate, and share important program information with providers. Covered topics include changes in claims processing, common problems with billing, new programs or changes in existing programs, and other information that may directly affect providers. If you would like to receive the electronic newsletter, please sign up at [www.dmas.virginia.gov/pr-provider\\_newsletter.asp](http://www.dmas.virginia.gov/pr-provider_newsletter.asp).

Please note that the Provider E-Newsletter is not intended to take the place of Medicaid Memos, Medicaid Provider Manuals, or any other official correspondence from DMAS.

Attached Number of Pages: (1)

***DURABLE MEDICAL EQUIPMENT AND SUPPLIES PROVIDER MANUAL***  
**REVISION CHART**  
**December 30, 2005**

**SUMMARY OF REVISIONS**

<b>MANUAL SECTION</b>	<b>MATERIAL REVISED</b>	<b>NEW PAGE NUMBER(S)</b>	<b>REVISED PAGE(S)</b>	<b>REVISION DATE</b>
Appendix B	Appendix B		Entire Appendix B	12/30/2005

**FILING INSTRUCTIONS**

<b>MANUAL SECTION</b>	<b>DISCARD</b>	<b>INSERT</b>	<b>OTHER INSTRUCTIONS</b>
Appendix B	Old Appendix B	New Appendix B	